8 CORRECTIONS TO INFORMATION PREVIOUSLY REPORTED

<u>Corrections To Data Submitted</u> <u>Electronically Or Magnetically</u>

Replacement files will be accepted electronically via dial-up and on magnetic tape, cartridge or diskette.

Please mail correction tapes and diskettes to:

DWD - UI Wage Reporting P.O. Box 7962 Madison, WI 53707

Please be sure to clearly label correction tapes and diskettes as replacement data and indicate the guarter/year the data replaces.

If only a few adjustments are necessary, please do not send a replacement file, but instead report your adjustment on paper as instructed below.

<u>Corrections To Information Submitted On</u> Paper Reports

Corrections to the NAME and/or SOCIAL SECURITY NUMBER should be specified in a letter or on separate printouts. Include and clearly define both the incorrect information and the correct information so the employee record can be located in our files.

Corrections to an employee's reported quarterly gross wages should be made using our Wage Adjustment Report. To order copies of our Wage Adjustment Report, call (608) 266-6877 or email wagenet@dwd.state.wi.us.

Mail correction letters, printouts, and Wage Adjustment Reports to:

DWD - UI Wage Reporting P. O. Box 7962 Madison, WI 53707

DO NOT correct employee wages for a <u>prior</u> <u>quarter</u> on the <u>current quarterly report</u>. Enclose a separate note, letter or Wage Adjustment Report indicating the correction. Be sure to include your employer account number the social security number(s) of the employee(s) and the quarter(s) involved.

ADJUSTMENTS FOR CALENDAR YEAR:			WAGE	ADJUST	WAGE ADJUSTMENT REPORT	EPORT			Madi (6	Madison, WI 53707 (608) 266–6877
1. UI ACCOUNT NUMBER	EMPLOYER NAME				EMPLOY	EMPLOYER ADDRESS				
			1st Quarter Ending 3/31	nding 3/31	2nd Quarter	2nd Quarter Ending 6/30	3rd Quarter Ending 9/30	Ending 9/30	4th Quarter	4th Quarter Ending 12/31
2. SOCIAL SECURITY NUMBER	3. LAST NAME	4. FIRST NAME	5. REPORTED WAGES	6. CORRECT WAGES	5. REPORTED WAGES	6. CORRECT WAGES	5. REPORTED WAGES	6. CORRECT WAGES	5. REPORTED WAGES	6. CORRECT WAGES
7. SIGNATURE			DATE		TITLE				PHONE NUMBER	ER